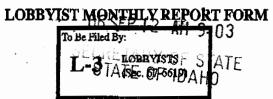


State of Idaho

Ben Ysursa Sccretary of State



Page of Page(s)

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Lobbyist's name and permanent husin Odoho Sicho 5409 Wich		assa	c D	G-11-06	Perio	od covered Inouth ending		
					(M	a) (Day) (Yr.) 3 24 06		
Category of Expenditure	ble expenditures made or	Proportionate a	mounes co	nuibuted by each emp	oyer on behalf of Lol loyer (Identify employ			
Reimburged Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported	* Total Amount for All Employers	Remployer N		Employer No. 2	Employer No. 3 Employer No.			
Entertainment Food and Refreshment	s_O	\$ 0		\$	s	s		
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Travel	<u>O</u> .	. <u> </u>						
Telephone				7-24-0-10-1				
Other Expenses or Services		0		•		·		
Total	\$ <u>O</u>	s <u></u>		\$	* <u> </u>	. \$		
*When the number of employer Item The totals of each expend						se entered on Page I.		
2 Date	Place		Amount		of Legislators & Public	Officials in Group		
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Continued on attached page(s))	·	·					
INST	TRUCTIONS		Iter 3	i Ex	nployer(s) Name(s) and			
Who should file this form: A 67-6617 Idaho Code.	ny lobbyist rogistered u	inder Section	No.1	No.1 State Wheel Boards Clased Bouse II State Street				
Filing deadline: Monthly re month for activities of the pas) days of the	No.2			_		
	Ben Ysursa		No.3			· · · · · · · · · · · · · · · · · · ·		
PC	retary of State DBox 83720							
	, ID 83720-0080 -2852 Fax: (208) 334-2	282	No.4					

Item.	perso	inal prop	erty to any Legis	lator, or	for or on behalf of	any leg	islator.	77,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		ey or other tangible or intang
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Subject			econtion or Other		iation Bill Number	01,	Agriculture, hor farming, and liv		17	Health service, medicine, drugs and controlled substances, health
(from			itve Ident, Number	· and S	Section Number	62	Amusements, g			insurance, hospitals
- 41	1	RS	6445			1	and sports		. 18	Higher education
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						04	Children, minor	s, youth,		insurança)
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						. OZ.		nment, pollution,	**	judges, crimes, prisons
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